

**REVIEW OF THE IMPLEMENTATION OF THE  
RECOMMENDATIONS OF THE INQUIRY INTO THE  
MANAGEMENT AND OPERATIONS OF THE AMBULANCE  
SERVICE OF NSW**

**Name:** Name suppressed

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Partially Confidential

January 25, 2010

Dear Review Committee

Re: Review No.2

I wish to table to the review panel further information in regards to the outcome of the first report. Unfortunately although the service has made piece meal attempts to address some issues they have not changed any of the main issues brought to your attention in the last review.

The service has taken the review and implemented actions such as grievance resolution training yet has not addressed any of the management problems. It seems to think that the problems are only associated with staff further creating an adverse workplace.

**Culture and Management.**

This has had the net affects of lowering staff morale and has left a major unresolved point of conflict to be drawn out until I don't know when.

There has been no support for me while undergoing the coroner's inquest along with a number of other officers concerned. This has left me feeling that the service is uncaring and not taking responsibility for implementing protocols that are open to interpretation.

This area HSU sub-branch has just raised concern with the service for the endemic lack of staff and resources which has had the result of requiring staff to do overtime to supply even the most basic staffing levels set in 2002. Along with the lack of staffing the service has introduced further technology in regards to command and control further dehumanizing the process. This has had the net effect of increasing fatigue and lowering officer's welfare standards.

The ASNSW undertook a consultant's review (ORH) of all rosters in our area. It was found that only 1 station was possibly to benefit from a roster starting time change. The service took this with a passion yet at the same time the review found that in order to provide a minimum standard of care 2 on day shift 2 on-call would require a minimum 5 staff members at all stations. The service has not acted upon the recommendations and is now advocating the use of volunteers to staff the smaller stations.

### **Review Points**

#### **Recommendation 3**

We currently have

\_\_\_\_\_ has clearly indicated their dislike of the Union and as such are prepared to take any issue to disputation. This has the effect on staff of a workplace that is in continual disputation and conflict. As previously indicated the service has employed an outside consultant to review the workplace.

#### **Recommendation 9**

At \_\_\_\_\_ a recent application for the Team Leader has been filled with a junior member of the station. This in its self is not the issue. There is a lack of transparency as to the application of merit based selection. The other applicant has completed

\_\_\_\_\_ where as the successful applicant has none of these qualifications.

The obvious observation from the outside is that the unsuccessful applicant is not in the social circle of the District Manager. This decision has endorsed the staff perspective that the successful applicant was always going to get the position not based on his knowledge. It has now put the incumbent team leader in a position that he now has to gain staff respect and endorsement.

#### **Recommendation 13**

There has been no paid training time within this area. An attempt to obtain TIL to complete training has been rejected by the service. Currently the service position is that we attend recertification every 18 months.

#### **Recommendation 14**

Changed to 18 months.

**Recommendation 15**

Not Implemented

**Recommendation 18**

Currently raising concerns requesting an investigation into the lack of staffing in this area with relief factors as low as 6.6%. Applications for annual leave and long service leave are being rejected on the grounds of service provision yet the service is unable to maintain service levels set in 2002. Towns with 60,000 populations have had 1 officer on night shift due to shortages.

**Recommendation 22**

Not implemented. Accommodation at Rozelle has now been restricted from level 1 recruit's making it harder for country applicants to be employed. They now have to locate their own accommodation to attend level one training

**Recommendation 28**

Not Implemented

**Recommendation 29**

Not Implemented

**Recommendation 30**

Not Implemented

**Recommendation 31**

Not Implemented

**Recommendation 35**

Implemented without increasing staffing levels

**Recommendation 41**

Not implemented

**Staffing pay and award conditions**

The service has not finished the award interpretation discussions with the union creating confusion and disagreement on a number of issues.

The service has not implemented a trial remote incentive scheme as yet. This is directly affecting staffing issues in this area, with the new level 2 officer being posted to Lockhart

resigning from the service because of the posting. Although the incentives may not have changed this officer's position it was not offered.

#### **PSCU No Change**

During recent incidents it has been highlighted to the service that the PSCU unit has been operating outside of the regulations in its attempt to investigate a number of recent issues. They have protracted the investigations for an unreasonable period, in some cases over 12 months. This is causing financial hardship and emotional duress over issues that are found to be inconclusive or not founded. There is no recourse for officers to recoup funds or apologies from the system. This increases frustration and disappointment within the service. You cannot apply for any positions within the service while under investigation and in smaller towns often community resentment to either the officer or the service has occurred. PSCU has become the dumping ground for many issues that should be dealt with by managers at a local level. Much of what ends up there should never go there in the first place. The reason is probably two fold. Managers do not feel they have the power to deal with the issues locally and many are too busy to deal with the issues so they give it to PSCU.

Explanations sort from PSCU as to the period of investigation is normally "we are only a small unit". The service has not attempted to improve the situation which is totally inappropriate as officer's careers and family are often severely affected.

#### **Rural incentive packages 2002- current: No Change**

This issue was raised with the service to try and reduce the city centric drift away from the country back to the city. It was supposed to give officers some incentive to remain at the smaller locations and provide increased skill levels at the town.

**To date no progress has been made**

#### **Vehicle Fleet 2002-current: No Change**

Fleet has been a problem since I have been in the service. The introduction of fully leased vehicles was to alleviate the responsibility of the service having to replace old vehicles. The lease of vehicles has been poorly managed with the subsequent issues' in regards to lease arrangements such as excessive kilometers and over time penalties.

There is no consultation with the end user in regards to what they want. A committee was raised to identify the minimum standard requirements of an Ambulance. This has not been progressed. The replacement of the Toyota 4X4 ambulance with the VW Extreme is a case in point. Clearly the vehicles are made for totally different situations yet without consultation with ambulance officers or local managers; they were leased and put in place only to fail.

The service in this area has taken 2 years to complete a review of fleet with no result as yet to the requirements or expectations.

Vehicles are continually going over the lease mileage and have poor quality assurance checks. HSU is currently trying to identify the location of \$4.6 million of ambulance enhancements funded by the state government when we received the staff enhancements.

**The service has been unable to identify any vehicle enhancements funded by the state. The funding was provided to enhance the Mercedes fleet to provide Cat 1 ambulances for the rural enhancements across the state. In the Southern Division funds were spent on Subaru vehicles.**

In 2005 identification of poor Quality Assurance on the new bush fire trailers was raised with the service. Photos of the poor workmanship and defects on the new trailers were provided to fleet including splits in the trays, and bent floors. To date no rectification has taken place (other than putting blocks of wood into the trailer) and a statement by the fleet manager John Flynn stating "they were unsure of the manufacture and therefore unable to gain warranty" even though we pointed out the manufactures place card on the trailer.

**Fleet has continually had no accountability on any issue**

**Staffing Rural Enhancements 2002 – current: No Change currently understaffed**

The service has been provided funding for training of enhancements for the rural sector by the Premiers department. After negotiating a bipartisan agreement it was put on record with the rollout of extra staff to take place over 3 years and be completed by June 2007. Early 2007 the service reneged on the commitment leaving 6 stations without the enhancements. The service stated that all positions had been filled with no other available funding to provide for further enhancements.

After the threat of industrial action the service identified that this was not the case and the service agreed to advertise and fill the positions. After advertising the position the service then would not appoint the staff due to funding issues. This has since been resolved again after the agitations of HSU.

**This is further evidence that the service is inept at managing its resources and abiding by agreements reached in good faith and not adhering to the Minister for Health's specific guidelines.**

**Growth & Assets; No Change**

**The service has no formula for assessing demand and future requirements of the communities.**

It is reactive to industrial campaigns as has been evidenced since 1998 with Health Services Union pursuing and receiving further staff enhancements. The service position was "there was sufficient staff available". Clearly this was not the case as we received a number of enhancements from the industrial campaigns and are still struggling to maintain a service. As evidenced by its dependence on over time.

The service has no identified procedure for assessing the requirements of areas both old and new as to the service provision staffing numbers and vehicle mixes. They introduced a staffing Matrix to provide a constant between stations. With the introduction of Wentworth station their own matrix was not used in establishing the staffing requirements for the station. They have no procedure as to the mix of SO / AO mix for supervision.

Assets are well below the standard of modern facilities. Most buildings require extensive renovations or replacement. We have an increasing work load from casualty work to medical transfers being the only city in the area with a Base hospital. Documented work load has been acknowledged by the service that it is increasing at 10% per year.

#### **Fatigue: No Change**

The service has been recalcitrant on this issue. They have plenty of information and data that clearly indicates that this is a major issue for staff. We formulated a joint draft fatigue policy in 2002 at a sector level and presented it to the state executive where it promptly got lost. They have made no attempt to address this issue on a state wide basis leaving it up to local agreements to resolve what it can.

They did however instigate the taking of fatigue leave from officer's sick leave entitlements, while officers were on fatigue leave after in some cases having worked 24hrs without rest.

#### **Operations Centre:**

The operations centre at                      has reportedly now cost the NSW taxpayer 100 million dollars. For this investment we have seen an increase in response times chiefly as a result of the introduction of a call taking process which adds 3 mins to response times. This system was introduced due to the need for certain information being required to enable PRO Q A to provide a computer generated response based on the notion of the correct ambulance crew, to the correct case, in the correct time. This results in a certain response code for certain cases with a particular skill level of officer and the type of response ie "lights and siren" = Hot Response or without = cold response. This system is a dismal failure. The Service now intends to review the PRO Q A matrix so as to redefine response codes based more on their inability to meet the codes due to staffing rather than best practice. The losers are the public of this state.

#### **Joint Consultative Arrangements:**

This process has been used on and off by the Service for many years as the forum for airing and resolving industrial issues at local, Divisional and State level. It has proven to be ineffectual and does nothing more than protract issues. The chief issue appears to be, that each manager at a given level does not feel empowered to make a decision for fear of retribution from someone further up the line. In effect, the JCC process is performed by the Service as it is a requirement by Health to do so, not a genuine attempt to resolve issues. Invariably many issues raised at this forum either go on for years without resolution or end

up in the Industrial Relations Commission due to frustration felt by Ambulance Officers. Some issues are still unresolved after 2 years.

**In Conclusion:**

Over all, the above issues are but a few of the ongoing management by crisis system being used by the service. Mr. Rochford has to be accountable as is Mr. M Willis in the poor decisions that continue to provide staff with poor moral, poor resources, poor assets, and poor direction. They continue to implement different projects, which in some cases contradict other project already in place.

The service consults with the HSU to obtain feedback and then implements changes in direct contravention of the position of the ambulance officers.

Their own culture survey clearly indicated the endemic problems being felt by the officers and their lack of trust and faith in the current management. The JCC process introduced has been ineffectual and dismissive of the concerns of the staff. Rosters are required to be updated due to enhancements received, yet we can not change them without direct approval of the CEO. Often the target of the projects and realignment are not service provision to the community but the removal of selected personnel or financial concerns.

**This is an emergency service requiring every person to provide community support in times of crisis. The service is currently in crisis with no direction, rundown infrastructure, the inability to provide suitable equipment and combative industrial attitudes. Their non compliance to their own agreements increases the frustration of officers providing 24hour cover at minimum or below, staffing levels. The opportunity to take study leave, long-service leave and annual leave entitlements is impaired due to the lack of foresight in management as to the requirements of their workers and communities.**

**Final Comment**

**Quote Mr Rochford "If people choose to live in Rural NSW then they choose to receive decreased service provision".**

All this information has been gleaned form observations of what is happening in practice and as an active Sub-branch representative.

Sincerely